

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Aug 20 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J39196

(7)

1. Corporation Name

THE STERN GROUP, INC.

Principal Place of Business

C/O CHRISTOPHER MURMAN
2323 HIGHWAY 127
PERRY GA 31069
US

Mailing Address

MURMAN, CHRISTOPHER
2323 HIGHWAY 127
PERRY GA 31069
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/23/1986

4. FEI Number

59-2854310

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

MURMAN, CHRISTOPHER
14801 MCCORMICK DR
TAMPA FL 33626

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME D BRASWELL, ALLEN S., SR.
STREET ADDRESS 14801 MCCORMICK DR
CITY-STATE-ZIP TAMPA FL

TITLE ☐ DELETE

NAME PD BRASWELL, ALLEN S., JR.
STREET ADDRESS 4801 CROMWELL AVE
CITY-STATE-ZIP MEMPHIS TN

TITLE ☐ DELETE

NAME VPD MURMAN, CHRISTOPHER
STREET ADDRESS 2323 HIGHWAY 127
CITY-STATE-ZIP PERRY GA

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

TWO SEASIDE LANE #102
BELLEAIR, FL 33756

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

8-11-98

91298730416

CR2E034 (5/98)



George W. Bollenback
Peter B. Forret
Michael D. Bollenback
Richard A. Cristini

Date 8/7/98

Name CHRIS MURMAN

RE: THE STERN GROUP, INC.

Your 1998 State of Florida Corporation Annual Report is enclosed for your review and filing. Please follow these instructions:

☒ Date, sign and mail to Division of Corporations, Annual Reports Section, P.O. Box 1500, Tallahassee, Florida 32302-1500 no later than 9/30/98.

☒ Enclose a check, payable to "Secretary of State", in the amount of \$ 550.00.

☐ _____

The client copy is for your records.

BOLLENBACK & FORRET, P.A.

ANNUAL.PER

CHRIS -

IT IS IMPORTANT THAT YOU PAY THIS
AS SOON AS POSSIBLE SO THAT WE
CAN PROCEED WITH THE MERGER
INTO GOLF CONCEPTS.

CALL IF ANY QUESTIONS.

THANKS!

Mike



The CPA. Never Underestimate The Value.